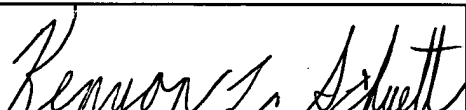
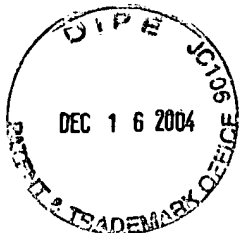
 <h2 style="text-align: center;">TRANSMITTAL FORM</h2> <p style="text-align: center;">(to be used for all correspondence after initial filing)</p>	<i>Complete if Known</i>	
	Application Number	10/750,643
	Filing Date	December 31, 2003
	First Named Inventor	William H. EBY
	Examiner Name	D. Kruse
	Group Art Unit	1638
Total Number of Pages in This Submission <u>10</u>	Attorney Docket Number	1421-140
ENCLOSURES (check all that apply)		

- | | | |
|--|---|--|
| <input checked="" type="checkbox"/> Fee Transmittal Form | <input type="checkbox"/> Assignment Papers | <input type="checkbox"/> After Allowance Communication to Group |
| <input checked="" type="checkbox"/> Fee Attached | <input type="checkbox"/> Drawing(s) | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences |
| <input checked="" type="checkbox"/> Amendment/Reply | <input type="checkbox"/> Licensing-related Papers | <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) |
| <input checked="" type="checkbox"/> After Final | <input type="checkbox"/> Petition | <input type="checkbox"/> Proprietary Information |
| <input type="checkbox"/> Affidavits/declaration(s) | <input type="checkbox"/> Petition to Convert to a Provisional Application | <input type="checkbox"/> Status Letter |
| <input type="checkbox"/> Extension of Time Request | <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address | <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): |
| <input type="checkbox"/> Express Abandonment Request | <input type="checkbox"/> Terminal Disclaimer | 1) Certificate of Express Mail Label No. EV195486092US |
| <input type="checkbox"/> Information Disclosure Statement | <input type="checkbox"/> Request for Refund | 2) ATCC receipt |
| <input type="checkbox"/> Certified Copy of Priority Document(s) | <input type="checkbox"/> CD, Number of CD(s) | |
| <input type="checkbox"/> Response to Missing Parts/ Incomplete Application | REMARKS: | |
| <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | | |

SUBMITTED BY		Complete (if applicable)			
NAME & REG. NUMBER	Kenyon L. Schuett, Reg No. 44,324				
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Date: December 13, 2004

To: Kenyon L. Schuett
Fax Number: 303-799-6898

From: ATCC Patent Depository **Number of pages:** 1 (Including this page)

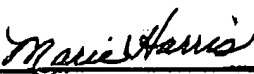
REFERENCE: Patent Deposit (Ref: Docket or Case No: 1421-115, 1421-106, 1421-096, 1421-140, 1421-145)

Description: Soybean Glycine max (L.): 0487686 assigned PTA-6362
Soybean Glycine max (L.): 0491737 assigned PTA-6363
Soybean Glycine max (L.): S022211 assigned PTA-6364
Soybean Glycine max (L.): S030154 assigned PTA-6365
Soybean Glycine max (L.): S030160 assigned PTA-6366

Date of Deposit: November 30, 2004

The ATCC Certificate of Deposit will be forwarded to you within 30 days. An invoice will be sent under separate cover as follows:

Total Fees for PTA-6362 to PTA-6366 **\$ 12,500.00**
(Storage/informing/viability testing)



Marie Harris, Patent Specialist
ATCC Patent Depository

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